U.S. Department of Labor Office of Labor-Management Standards Washington, DC 20210

FORM LM-30 LABOR ORGANIZATION OFFICER AND **EMPLOYEE REPORT**

Form approved Office of Management and Budget No. 1215-0188 Expires 11-30-2006

This report is mandatory under P.L. 86-257, as amended. Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U.S.C 439 or 440.

For (Official Use Only
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1. File Number **U** - 787/

READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.

2. Fiscal Year Covered From:

1 / 1 / 2004 Through: 12 / 31 / 2004

3. Name and address of person filing.	4. Name, file number, and address of labor organization.				
Name David J Yockel	Name Int'1 Brotherhood Of Electrical Workers (IBEW)				
	Labor Organization File Number 000-116				
P.O. Box, Bldg., Room No., if any IBEW, Room 356	P.O. Box, Building and Room Number, if any				
Street 900 Seventh Street, NW	Street 900 Seventh Street, NW				
City Washington	City Washington				
State District of Columbia ZIP Code + 4 20001	State District of Columbia ZIP Code + 4 20001				
5. Position in labor organization. Senior Manager, Ed.& Research	Dept.				
	sions set forth in the instructions):				
A. Held an interest in, engaged in transactions (including loans) with, or a monetary value from an employer whose employees your organization.	derived income or other economic benefit of on represents or is actively seeking to represent.				
6. Name and address of Employer (including trade name, if any).	7.a. Nature of Interest, Transaction, or Income.				
Name					
Trade Name, if any:					
P.O. Box, Bldg., Room No., if any					
Street	7.b. Amount.				
City					
State ZIP Code + 4					
Signature					
15. Signature and verification. The undersigned declares, under penalty of submitted in this report (including the information contained in any accompany undersigned's knowledge and belief, true, correct, and complete. (See the second contained in the second contained contained in the second contained co	ing documents) has been examined by the signatory and is to the boot of the				
Signed David J. Yorkel	On 8-11-2005 202-728-6109				
	Date Telephone Number				

Date

Telephone Number

Name of Person Filing David Yockel	File Number U-				
B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.					
8. Name and address of Business (including trade name, if any). Name The Marco Consulting Group Trade Name, if any: P.O. Box, Bldg., Room No., if any Suite 900 Street 550 West Washington Blvd. City Chicago State Illinois ZIP Code + 4 60661	9. Business deals with:				
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such dealing].			
Name Trade Name, if any: P.O. Box, Bldg., Room No., if any	Marco Consulting is a consultant to the IBEW with respect to the investments of the IBEW and its related pension trust funds.				
Street	11.b. Approximate dollar value	of such dealing. Not Ascertainnele			
City	12.a. Nature of interest held of				
State ZIP Code + 4	May 5, 2004, Golf				
	12.b. Amount.	\$57			
C. Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value.					
13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).	14.a. Nature of payment.				
Name Trade Name, if any:					
For any company of the contract of the contrac					
P.O. Box, Bldg., Room No., if any					
Street					
City					
State ZIP Code + 4					
13.b. Is the Business an Employer or Consultant ?	14.b. Amount of payment.				

Name of Person Filing David Yockel	File Number U-				
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8. Name and address of Business (including trade name, if any). Name Prudential Financial, Inc Trade Name, if any: P.O. Box, Bldg., Room No., if any Street 280 Trumbell Street City Hartford State Connecticut ZIP Code + 4 06103	9. Business deals with: a. Labor Organization b. Trust c. Employer				
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such dealing.				
Name Trade Name, if any: P.O. Box, Bldg., Room No., if any	Prudential is a money management consulting firm that provides services to the IBEW and IBEW local unions.				
Street (11.b. Approximate dollar value of such dealing. Not Ascentationals 12.a. Nature of interest held or income received.				
City					
State ZIP Code + 4	December 1, 2004, Dinner				
	12.b. Amount,	\$79			
C. Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value.					
 Name and address of Employer or Labor Relations Consultant (including trade name, if any). 	14.a. Nature of payment.				
Name					
Trade Name, if any:					
P.O. Box, Bldg., Room No., if any					
Street					
City					
State State					
13.b. Is the Business an Employer or Consultant?	14.b. Amount of payment,				

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8. Name and address of Business (including trade name, if any). Name The Marco Consulting Group Trade Name, if any: P.O. Box, Bldg., Room No., if any Suite 900 Street 550 West Washington Blvd. City Chicago State Illinois ZIP Code +4 60661	9. Business deals with:				
10. If 9.b. or 9.c. is checked give trust or employer's name.	Baseline and the second				
Name	Marco Consulting is a consultant to the IBEW with respect to the investments of the IBEW and its				
Trade Name, if any:	related pension tru	ist runds.			
P.O. Box, Bldg., Room No., if any					
Street	11.b. Approximate dollar value	e of such dealing. Not: Ascentativable			
City	12.a. Nature of interest held	- Contract of the contract of			
State ZIP Code + 4	December 2, 2004, I	Dinner			
	12.b. Amount.	\$93			
C. Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value.					
13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).	14.a. Nature of payment.				
Name					
Trade Name, if any:					
P.O. Box, Bldg., Room No., if any					
Street					
City					
State ZIP Code + 4					
13.b. Is the Business an Employer or Consultant?	14.b. Amount of payment.				